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| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | - | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | | |
|-----|--|--|---|---|
| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. | Pamela First name A Middle name Stewart Last name and Suffix (Sr., Jr., II, III) | - | First name Middle name Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years Include your married or maiden names. | Pamela Stewart-Myles | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-2381 | | |

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Case number (if known)

Debtor 1 Pamela A Stewart

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|--|---|---|---|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. |
| | Include trade names and doing business as names | Business name(s) | Business name(s) |
| | | EINs | EINs |
| 5. | Where you live | 179 Dogwood | If Debtor 2 lives at a different address: |
| | | Park Forest, IL 60466 Number, Street, City, State & ZIP Code Cook County | Number, Street, City, State & ZIP Code County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

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Debtor 1 Pamela A Stewart

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Case number (if known)

Part 2: Tell the Court About Your Bankruptcy Case

| Par | Tell the Court About | our Ba | nkruptcy Cas | se | | | |
|------------|--|--------|-----------------------------------|---|---|---|----------|
| 7. | The chapter of the Bankruptcy Code you are | | | | each, see Notice Required by 13 and check the appropriate box. | U.S.C. § 342(b) for Individuals Filing for Bankruptcy | y (Form |
| | choosing to file under | ■ Ch | | | | | |
| | | ☐ Ch | apter 11 | | | | |
| | | ☐ Ch | apter 12 | | | | |
| | | ☐ Ch | apter 13 | | | | |
| 8. | How you will pay the fee | | about how you | ı may pay. Typica y is submitting yo | ally, if you are paying the fee yours | with the clerk's office in your local court for more det elf, you may pay with cash, cashier's check, or mone ttorney may pay with a credit card or check with a | |
| | | | | the fee in instal | | , sign and attach the Application for Individuals to Pa | ay The |
| | | | I request that not required to | t my fee be waiv o, waive your fee, | red (You may request this option and may do so only if your incom | only if you are filing for Chapter 7. By law, a judge mage is less than 150% of the official poverty line that apple. If you choose this option, you must fill out the Apple. | plies to |
| | | | | | ee <i>Waived</i> (Official Form 103B) a | | |
|) . | Have you filed for bankruptcy within the last 8 years? | ■ No. | | | | | |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | |
| 0. | Are any bankruptcy cases | ■ No | | | | | |
| | pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes | S. | | | | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| 11. | Do you rent your residence? | ■ No. | Go to li | ne 12. | | | |
| | | ☐ Yes | s. Has you | ur landlord obtain | ed an eviction judgment against y | ou and do you want to stay in your residence? | |
| | | | | No. Go to line 12 | 2. | | |
| | | | | Yes. Fill out <i>Initia</i> bankruptcy petiti | | dgment Against You (Form 101A) and file it with this | 6 |

Document Page 4 of 55 Case number (if known) Debtor 1 Pamela A Stewart Part 3: Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? ☐ Yes. Name and location of business A sole proprietorship is a business you operate as an Name of business, if any individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 you a small business U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is alleged to pose a threat of Yes imminent and identifiable What is the hazard? hazard to public health or

safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Pamela A Stewart Page 5 of 55

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

do so.

Active duty. I am currently on active military duty in

a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 Pamela A Stewart Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under ☐ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that after I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are Yes. any exempt property is paid that funds will be available to distribute to unsecured creditors? excluded and administrative expenses No are paid that funds will be available for distribution ☐ Yes to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **25,001-50,000** 1-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ■ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **□** \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be? □ \$10,000,000,001 - \$50 billion □ \$50,000,001 - \$100 million ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion ☐ \$500.001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Pamela A Stewart Pamela A Stewart Signature of Debtor 2 Signature of Debtor 1 Executed on March 2, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Pamela A Stewart Page 7 01 55

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ John P. Carlin | Date | March 2, 2016 |
|--|---------------|----------------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| John P. Carlin | | |
| Printed name | | |
| John Carlin Firm name | | |
| 1305 Remington Road | | |
| Suite C | | |
| Schaumburg, IL 60173 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone 847-843-8600 | Email address | jcarlin@changandcarlin.com |
| 6277222 | | |
| Bar number & State | | |

| | | | <u>-111 </u> | |
|---------------------|--------------------------|-------------------|---|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Pamela A Stewar | t | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| • | | | |
|------|--|--------------|--------------------------|
| Part | 1: Summarize Your Assets | | |
| | | Your a | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 8,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 2,850.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 10,850.00 |
| Part | 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 28,249.85 |
| | Your total liabilities | \$ | 28,249.85 |
| Part | 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,334.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,245.00 |
| Part | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other. | her schedu | ıles. |
| 7. | Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a pe | ersonal, far | nily, or household |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

court with your other schedules.

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Page 9 of 55 Case number (if known) Debtor 1 Pamela A Stewart

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8. 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,578.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total clai | m |
|--|------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | ☐ Check if this is an amended filing | | |
|---|---|--|--|
| First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | | | |
| | | | |
| | | | |
| Case number | | | |
| | | | |
| Official Form 106A/B Schedule A/B: Property | 12/15 | | |
| n each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list hink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsormation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your nanswer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In | t the asset in the category where you onsible for supplying correct | | |
| . Do you own or have any legal or equitable interest in any residence, building, land, or similar property? | | | |
| □ No. Go to Part 2. | | | |
| ■ Yes. Where is the property? | | | |
| 1.1 What is the property? Check all that apply. 179 Dogwood Do not dedi | | | |
| Street address, if available, or other description Street address, if available, or other description | ot deduct secured claims or exemptions. Put imount of any secured claims on Schedule D: litors Who Have Claims Secured by Property. | | |
| Condominium or cooperative | viio Have Claims Secured by Property. | | |
| Park Forest IL 60466-0000 ☐ Land ☐ Manufactured or mobile home Current value entire prop | | | |
| ☐ Timeshare | \$8,000.00 | | |
| Who has an interest in the property? Check (such as fe | he nature of your ownership interest ee simple, tenancy by the entireties, or e), if known. | | |
| Debtor 1 only Fee simp | ple | | |
| | k if this is community property nstructions) | | |
| Other information you wish to add about this item, such as loop property identification number: 179 Dogwood, Park F 60466 | | | |
| | | | |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages

you have attached for Part 1. Write that number here.....=>

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$8,000.00

Document Page 11 of 55 Case number (if known) Debtor 1 Pamela A Stewart 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Who has an interest in the property? Check one. 3 1 Make: the amount of any secured claims on Schedule D: ■ Debtor 1 only Creditors Who Have Claims Secured by Property. Model Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another 2003 Ford Escape \$1.500.00 \$1,500.00 170K ☐ Check if this is community property paid in full needs significant repair (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages \$1,500.00 .you have attached for Part 2. Write that number here.....=> **Describe Your Personal and Household Items** Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... Misc used household goods has bought no furniture since 2012 \$850.00 nothing unique or valuable 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe.....

Case 16-07283

Doc 1

Filed 03/02/16

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Desc Main

| Debtor | Case 16-07283 Pamela A Stewart | Doc 1 | Filed 03/02/16 Document | Entered 03/02/16 14:36:39 Page 12 of 55 Case number (if known) | Desc Main |
|-----------------|---|-------------------------------|---|--|---|
| | thes samples: Everyday clothes, furs, | leather coats, | designer wear, shoes, ac | | |
| | used cl | othing | | | \$300.00 |
| ■ N | amples: Everyday jewelry, costu | me jewelry, er | ngagement rings, weddinç | g rings, heirloom jewelry, watches, gems, gold, | silver |
| Ex ■ N | ramples: Dogs, cats, birds, horse | es | | | |
| | · • | - | did not already list, inc | luding any health aids you did not list | |
| | dd the dollar value of all of yo art 3. Write that number here . | | | entries for pages you have attached for | \$1,150.00 |
| Part 4: | Describe Your Financial Assets | | | | |
| Do you | own or have any legal or equ | uitable intere | st in any of the followir | ng? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | amples: Money you have in your | - | | box, and on hand when you file your petition | |
| | institutions. If you have | | accounts; certificates of cunts with the same institu | leposit; shares in credit unions, brokerage hou tion, list each. | ses, and other similar |
| _ | 'es | | Institution na | ame: | |
| | 17.1. | | Checking | account with JP Morgan Chase | \$200.00 |
| | nds, mutual funds, or publicly amples: Bond funds, investment lo | | | market accounts | |
| □ Y | es | nstitution or is | suer name: | | |
| | nt venture | terests in inc | corporated and unincor | porated businesses, including an interest | in an LLC, partnership, and |
| □ Y | es. Give specific information ab Nam | oout them e of entity: | | % of ownership: | |
| Ne No ■ N | vernment and corporate bond egotiable instruments include per on-negotiable instruments are the do 'es. Give specific information about | sonal checks ose you canno | cashiers' checks, promis | ssory notes, and money orders. | |

Official Form 106A/B Schedule A/B: Property page 3

Issuer name:

Case 16-07283 Doc 1 Filed 03/02/16 Entered 03/02/16 14:36:39 Desc Main Document Page 13 of 55 Case number (if known) Debtor 1 Pamela A Stewart 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information...

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

| Deb | tor 1 | Pamela A Stewart | Document | Page 14 of 55 Case number (if kno | wn) |
|--------------|----------------|---|-------------------------------|---|--|
| 32. <i>I</i> | Any int | erest in property that is due you fro | | d | |
| | died. No | re the beneficiary of a living trust, exp | ect proceeds from a life inst | rance policy, or are currently entitled to rece | ive property because someone has |
| | | Give specific information | | | |
| _ | | against third parties, whether or no les: Accidents, employment disputes, | | | |
| _ | | Describe each claim | | | |
| | | ontingent and unliquidated claims | of every nature, including | counterclaims of the debtor and rights | to set off claims |
| _ | No Yes. | Describe each claim | | | |
| 35. <i>A</i> | Any fin | ancial assets you did not already li | ist | | |
| | No | | | | |
| L | J Yes. | Give specific information | | | |
| 36. | | he dollar value of all of your entries . Write that number here | | y entries for pages you have attached for | \$200.00 |
| Part | 5: De: | scribe Any Business-Related Property \ | ou Own or Have an Interest | In. List any real estate in Part 1. | |
| 37. D | o you o | wn or have any legal or equitable inter | est in any business-related p | roperty? | |
| | No. Go | to Part 6. | | | |
| | Yes. G | to to line 38. | | | |
| | | | | | |
| Part | | scribe Any Farm- and Commercial Fishiou own or have an interest in farmland, list | | n or Have an Interest In. | |
| 46. [| | | e interest in any farm- or c | ommercial fishing-related property? | |
| | _ | Go to Part 7. | | | |
| | ☐ Yes | Go to line 47. | | | |
| | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Part | 7: De: | scribe All Property You Own or Have an | Interest in That You Did No | List Above | |
| _ | Examp | have other property of any kind your les: Season tickets, country club mem | | | |
| | ■ No □ Yes. | Give specific information | | | |
| 54. | Add t | he dollar value of all of your entries | s from Part 7. Write that n | umber here | \$0.00 |
| Part | 8: Lis | t the Totals of Each Part of this Form | | | |
| 55. | Part 1 | : Total real estate, line 2 | | | \$8,000.00 |
| 56. | | : Total vehicles, line 5 | _ | \$1,500.00 | |
| | | : Total personal and household ite | ms, line 15 | \$1,150.00 | |
| | | : Total financial assets, line 36 : Total business-related property, | | \$200.00 | |
| 00. | | | _ | \$0.00 | |
| 60. 61 | | : Total farm- and fishing-related pr : Total other property not listed, lir | <u> </u> | \$0.00 | |
| 61. | r art / | . Total other property not listed, iii | T + | \$0.00 | |

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Case number (if known) Document

Debtor 1 Pamela A Stewart

Copy personal property total 62. Total personal property. Add lines 56 through 61... \$2,850.00 \$2,850.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$10,850.00

Official Form 106A/B

| | | Валина | 311 1 MMC ±0 M OC | |
|---|-------------------------|-------------------|-------------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Pamela A Stewar | t | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Current value of the Amount of the exemption you claim

Part 1: Identify the Property You Claim as Exempt

Brief description of the property and line on

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | The state of the s | | Specific laws that allow exemption |
|--|---|--|---|------------------------------------|
| | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| 179 Dogwood Park Forest, IL 60466 Cook County | \$8,000.00 | | \$8,000.00 | 735 ILCS 5/12-901 |
| 179 Dogwood, Park Forest, IL 60466 Line from <i>Schedule A/B</i> : 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 2003 Ford Escape 170K | \$1,500.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) |
| paid in full needs significant repair Line from <i>Schedule A/B</i> : 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Misc used household goods has bought no furniture since 2012 | \$850.00 | | \$900.00 | 735 ILCS 5/12-1001(b) |
| nothing unique or valuable Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| used clothing Line from Schedule A/B: 11.1 | \$300.00 | | \$300.00 | 735 ILCS 5/12-1001(a) |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| Checking account with JP Morgan Chase | \$200.00 | | \$1,000.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | |

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Case number (if known)

| 3. | e you claiming a homestead exemption of more than \$155,675? Ibject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) |
|----|---|
| | No |
| | Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? |
| | □ No |
| | □ Yes |

Official Form 106C

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| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|--|
| Debtor 1 | Pamela A Stewar | t | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| | | Documen | t Page | 19 of 55 | | |
|--|---|--|------------------------------------|--|---|--|
| Fill in this infor | mation to identify your c | ase: | | | | |
| Debtor 1 | Pamela A Stewart | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT O | F II I INOIS | | | |
| Offica Otatoo Bo | and aptoy Court for the. | | | | | |
| Case number (if known) | | | | | ☐ Check if amende | this is an |
| | | | | | amendo | a ming |
| | rm 106E/F | | | _ | | |
| | | Who Have Unse | | Aims I Part 2 for creditors with NONPI | | 12/15 |
| Schedule G: Exect D: Creditors Who he Continuation F case number (if kr | utory Contracts and Unexpi Have Claims Secured by Pro Page to this page. If you hav | red Leases (Official Form 106) operty. If more space is neede /e no information to report in | G). Do not included, copy the Part | e contracts on Schedule A/B: Pro e any creditors with partially se you need, fill it out, number the that Part. On the top of any add | cured claims that are entries in the boxes | listed in Schedule on the left. Attach |
| 1. Do any cre | editors have priority unsecu | red claims against you? | | | | |
| ■ No. Go | to Part 2. | | | | | |
| Yes. | | | | | | |
| Part 2: List A | All of Your NONPRIORITY | / Unsecured Claims | | | | |
| 3. Do any cre | editors have nonpriority un | secured claims against you? | | | | |
| ☐ No. Yo | u have nothing to report in this | s part. Submit this form to the co | ourt with your other | r schedules. | | |
| Yes. | | | | | | |
| unsecured | claim, list the creditor separa one creditor holds a particula | tely for each claim. For each cla | aim listed, identify | r who holds each claim. If a cred what type of claim it is. Do not list e more than three nonpriority unsec | claims already include | ed in Part 1. If |
| | | | | | Total | claim |
| 1 | ate Medical Group | Last 4 digits of a | ccount number | 4116 | \$ | 232.00 |
| • | reditor's Name V. Bryn Mawr Ave, | When was the de | ebt incurred? | 2015 | | |
| Chicag | o, IL 60631 Street City State Zlp Code | As of the date yo | ou file, the claim i | s: Check all that apply | | |
| | urred the debt? Check one. | _ | ., | | | |
| ■ Debto | | ☐ Contingent | | | | |
| ☐ Debto | • | ☐ Unliquidated | | | | |
| ☐ Debto | or 1 and Debtor 2 only | ☐ Disputed | | | | |
| ☐ At lea | st one of the debtors and ano | ther Type of NONPRI | ORITY unsecured | d claim: | | |
| ☐ Chec debt | k if this claim is for a comn | nunity | | | | |
| Is the cla | aim subject to offset? | ☐ Obligations ari | | ration agreement or divorce that y | ou did | |
| ■ No | | ☐ Debts to pensi | on or profit-sharin | g plans, and other similar debts | | |
| ☐ Yes | | ■ Other. Specify | Medica | al Bill | | |
| 4.2 Atlantic | c Crd | Last 4 digits of a | ccount number | 8431 | \$ | 4,559.00 |
| | reditor's Name | | | - | | · · · · · · |

Official Form 106 E/F

Po Box 13386

As of the date you file, the claim is: Check all that apply

When was the debt incurred?

Roanoke, VA 24033 Number Street City State Zlp Code

| Debtor | Case 16-07283 Doc 1 Pamela A Stewart | | ered 03/02/16 14:36:39 20 of 55 Case number (if know) | Desc Main | | |
|--------|---|---|---|-----------|--------|--|
| | Who incurred the debt? Check one. Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecure | | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a sep not report as priority claims | | | | |
| | ■ No | ☐ Debts to pension or profit-shari | ng plans, and other similar debts | | | |
| | Yes | Other. Specify 01 Or | nemain Financial Inc | | | |
| 4.3 | Bay Area Credit Service | Last 4 digits of account number | 4699 | \$ | 33.52 | |
| | Priority Creditor's Name PO Box 467600 Atlanta, GA 31146 | When was the debt incurred? | 2014 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | |
| | Who incurred the debt? Check one. Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | | | | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecure | | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a sep not report as priority claims | | | | |
| | ■ No | Debts to pension or profit-shari | ng plans, and other similar debts | | | |
| | Yes | ■ Other. Specify collect | | | | |
| 1.4 | Capital 1 Bank | Last 4 digits of account number | 0950 | \$ | 488.00 | |
| | Priority Creditor's Name Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130 | When was the debt incurred? | Opened 1/01/12 Last Active 8/14/13 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | |
| | Who incurred the debt? Check one. ■ Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | ■ No | ☐ Debts to pension or profit-shari | ng plans, and other similar debts | | | |
| | Yes | ■ Other. Specify Credi | t Card | | | |
| 4.5 | Capital One | Last 4 digits of account number | 2579 | \$ | 677.00 | |
| | Priority Creditor's Name | | | | · · | |

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| Debtor 1 | Pamela A Stewart | | Case number (if know) | |
|----------|--|--|---|--------------|
| | Attn: Bankruptcy Po Box 30285 | When was the debt incurred? | Opened 11/01/11 Last Active 8/02/13 | |
| | Salt Lake City, UT 84130 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ■ Debtor 1 only □ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | Little | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | a ciaim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a sepanot report as priority claims | aration agreement or divorce that you did | |
| | No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | ■ Other. Specify Credit | Card | |
| 4.6 | Comenity Capital Bank/HSN | Last 4 digits of account number | 5421 | \$ 620.00 |
| | Priority Creditor's Name Attn: Bankruptcy Po Box 183043 | When was the debt incurred? | Opened 7/01/11 Last Active 8/10/13 | |
| | Columbus, OH 43218 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ■ Debtor 1 only | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | - Student loans | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a sepanot report as priority claims | aration agreement or divorce that you did | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | ■ Other. Specify Charg | e Account | |
| | Credit Control, LLC | Last 4 digits of account number | 5421 | \$ 620.03 |
| | Priority Creditor's Name PO Box 5757 Phantom Dr. Suite 330 | When was the debt incurred? | 2015 | |
| | Hazelwood, MO 63042 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a sepanot report as priority claims | aration agreement or divorce that you did | |
| | ■ No | ☐ Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | ■ Other. Specify collect | tion | |

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| 4.8 | Eastern Account System INC. | Last 4 digits of account nu | mber 1917 | \$ | 238.00 |
|------|--|--|--|----------|--------|
| | Priority Creditor's Name Attn: Bankruptcy Dept. Po Box 837 Newtown, CT 06470 | When was the debt incurred | Opened 8/01/14 | | |
| | Number Street City State Zlp Code | As of the date you file, the | claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | ■ Debtor 1 only | | | | |
| | ☐ Debtor 2 only | Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY uns | ecured claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | |
| | Is the claim subject to offset? | Obligations arising out of not report as priority claims | a separation agreement or divorce that you did | | |
| | ■ No | ☐ Debts to pension or profit- | | | |
| | ☐ Yes | | ollection Attorney Comcast Cable ommunications | | |
| 4.9 | Glass Mountain Capital LLC | Last 4 digits of account nu | mber 2437 | \$ | 567.00 |
| | Priority Creditor's Name | Last 4 digits of account hu | inder 2407 | Φ | 007.00 |
| | 1930 Thoreau Dr. Ste. 100 | When was the debt incurred | <u>2015</u> | | |
| | Schaumburg, IL 60173 Number Street City State Zlp Code | As of the date you file, the | claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | ■ Debtor 1 only | | | | |
| | Debtor 2 only | Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY uns | ecured claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of not report as priority claims | | | |
| | ■ No | ☐ Debts to pension or profit | | | |
| | Yes | Other. Specify | ollection | | |
| 4.10 | Great Expectations | Last 4 digits of account nu | mber 2013 | \$ | 0.00 |
| | Priority Creditor's Name | | | * | |
| | 1375 Woodfield Rd. | When was the debt incurred | 2015 | | |
| | Suite 100 Schaumburg, IL 60173 | | | | |
| | Number Street City State Zlp Code | As of the date you file, the | plaim in. Chook all that apply | | |

| Debtor | 1 Pamela A Stewart | Document Page | 23 of 55 Case number (if know) | |
|--------|---|--|---|--------------|
| | Who incurred the debt? Check one. | _ | · , , | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a sep not report as priority claims | aration agreement or divorce that you did | |
| | ■ No | ☐ Debts to pension or profit-shari | ng plans, and other similar debts | |
| | Yes | ■ Other. Specify notice | only | |
| 4.11 | Great Expectations | Last 4 digits of account number | 5544 | \$ 0.00 |
| | Priority Creditor's Name 1375 Woodfield Rd. Suite 100 | When was the debt incurred? | 2015 | |
| | Schaumburg, IL 60173 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | , | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a sep not report as priority claims | aration agreement or divorce that you did | |
| | ■ No | Debts to pension or profit-shari | ng plans, and other similar debts | |
| | Yes | ■ Other. Specify collect | tion | |
| 4.12 | H & R Accounts Inc | Last 4 digits of account number | 2778 | \$ 280.00 |
| | Priority Creditor's Name 7017 John Deere Pkwy | When was the debt incurred? | Opened 6/01/14 | |
| | Moline, IL 61265 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | - | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a sep not report as priority claims | aration agreement or divorce that you did | |
| | ■ No | ☐ Debts to pension or profit-shari | | |
| | Yes | | ction Attorney Von Maur - go/Downstate | |
| 4.13 | ics | Last 4 digits of account number | 3180 | \$ 25.00 |
| | Priority Creditor's Name p.o. box 1010 | When was the debt incurred? | 5/88 | |
| | p.o. box 1010 Tinley Park II 60477-9110 | when was the dept incurred? | 5488 | |

| Case 16-07283 Doc 1 Pamela A Stewart | | | Desc Main | |
|--|--|--|------------------|------------------|
| Number Street City State Zlp Code | | | | |
| Who incurred the debt? Check one. Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsec | ured claim: | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | |
| Is the claim subject to offset? | ☐ Obligations arising out of a snot report as priority claims | separation agreement or divorce that you did | | |
| ■ No | ☐ Debts to pension or profit-sh | naring plans, and other similar debts | | |
| Yes | Other. Specify COI | lection | | |
| Kohls/capone Priority Creditor's Name | Last 4 digits of account numb | per2013 | \$ | 1,667.00 |
| N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051 | When was the debt incurred? | Opened 6/01/05 Last Active 4/29/14 | | |
| Number Street City State Zlp Code | As of the date you file, the cla | im is: Check all that apply | | |
| Who incurred the debt? Check one. ■ Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| Debtor 1 and Debtor 2 only | Disputed | urad alaimi | | |
| ☐ Check if this claim is for a community | Student loans | ured Claim. | | |
| Is the claim subject to offset? | ☐ Obligations arising out of a snot report as priority claims | separation agreement or divorce that you did | | |
| ■ No | ☐ Debts to pension or profit-sh | naring plans, and other similar debts | | |
| Yes | Other. Specify Cha | arge Account | | |
| Med Business Bureau | Last 4 digits of account number | per6860 | \$ | 353.00 |
| Po Box 1219 | When was the debt incurred? | Opened 8/01/10 | | |
| Number Street City State Zlp Code | As of the date you file, the cla | nim is: Check all that apply | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | |
| ■ Debtor 1 only | | | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsec | ured claim: | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | |
| Is the claim subject to offset? | ☐ Obligations arising out of a snot report as priority claims | separation agreement or divorce that you did | | |
| No | ☐ Debts to pension or profit-sh | naring plans, and other similar debts | | |
| Yes | Other. Specify Col | llection Attorney Medical | | |
| Midland Credit Management Priority Creditor's Name | Last 4 digits of account number | per <u>2579</u> | \$ | 677.15 |
| | Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Kohls/capone Priority Creditor's Name N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Med Business Bureau Priority Creditor's Name Po Box 1219 Park Ridge, IL 60068 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Debtor 1 only Debtor 1 only Check if this claim is for a community debt Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Check if this claim is for a community debt Is the claim subject to offset? | Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt of the debt? Check one. Debtor 1 only No Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt of the debtors and another Check if this claim subject to offset? Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt of the debtors and another Check if this claim is for a community debt of the claim subject to offset? Med Business Bureau Priority Creditor's Name Med Business Bureau Priority Creditor's Name Po Box 1219 Park Ridge, IL 60068 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt of the debtors and another Check if this claim is for a community debt of the debtor Street City State Zip Code Med Business Bureau Priority Creditor's Name Po Box 1219 Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 1 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 onl | Pamela A Stewart | Pamela A Stewart |

Entered 03/02/16 14:36:39 Case 16-07283 Doc 1 Filed 03/02/16 Desc Main Document Page 25 of 55 Debtor 1 Pamela A Stewart Case number (if know) 2365 Northside Dr When was the debt incurred? 2014 Suite #300 San Diego, CA 92108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes collection Other. Specify 4.17 Midland Funding 2624 2,005.00 Last 4 digits of account number Priority Creditor's Name 8875 Aero Dr Ste 200 When was the debt incurred? Opened 5/01/14 San Diego, CA 92123 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Factoring Company Account Credit One Other. Specify Bank N.A. 4.18 Midland Funding 2799 597.00 Last 4 digits of account number \$ Priority Creditor's Name 8875 Aero Dr Ste 200 When was the debt incurred? Opened 4/01/14 San Diego, CA 92123 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts

■ No

☐ Yes

Other. Specify

Factoring Company Account Ge Capital

Retail Bank

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| Debtor 1 | Pamela A Stewart | | Case number (if know) | | |
|----------|---|---|---------------------------------------|----|----------|
| I | Midwest Orthopaedic Consultant | Last 4 digits of account number | 6790 | \$ | 66.13 |
| | Priority Creditor's Name 75 Remittance Dr. 6581 Chicago, IL 60675 | When was the debt incurred? | 2014 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | ■ No | Debts to pension or profit-shari | ng plans, and other similar debts | | |
| | Yes | Other. Specify collection | | | |
| 4.20 | Nothland Group | Last 4 digits of account number | 8001 | \$ | 728.02 |
| | Priority Creditor's Name Po Box 390846 Minneapolis, MN 55439 | When was the debt incurred? | 2014 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | ■ Debtor 1 only | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sep | | | |
| | ■ No | | | | |
| | Yes | ■ Other. Specify collect | tion | | |
| 4.21 | Onemain | Last 4 digits of account number | 3102 | \$ | 5,707.00 |
| | Priority Creditor's Name | | Opened 9/04/49 Lest | | |
| | 6801 Colwell Blvd Irving, TX 75039 | When was the debt incurred? | Opened 8/01/13 Last Active 5/31/14 | | |

As of the date you file, the claim is: Check all that apply

Official Form 106 E/F

Number Street City State Zlp Code

| Debtor | Case 16-07283 Doc 1 Pamela A Stewart | Filed 03/02/16 Document F | | red 03/02/16 14:36:39 27 of 55 Case number (if know) | Desc Mair | ı |
|--------|--|---|-------------|--|-----------|----------|
| | Who incurred the debt? Check one. Debtor 1 only | Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY u | nsecured | l claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | | |
| | Is the claim subject to offset? | Obligations arising out not report as priority claims | | ration agreement or divorce that you did | | |
| | ■ No | ☐ Debts to pension or pro | ofit-sharin | g plans, and other similar debts | | |
| | Yes | Other. Specify | Unsec | ured | | |
| 1.22 | Onemain Fi | Last 4 digits of account r | number | 2492 | \$ | 4,559.00 |
| | Priority Creditor's Name | | | 0 | | |
| | 6801 Colwell Blvd Irving, TX 75039 | When was the debt incurred? | | Opened 8/01/13 Last Active 6/28/14 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | |
| | Debtor 1 only | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY un | nsecured | I claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | | |
| | Is the claim subject to offset? | Obligations arising out not report as priority claims | | | | |
| | No | Debts to pension or pro | ofit-sharin | g plans, and other similar debts | | |
| | Yes | ■ Other. Specify Unsecured | | | | |
| 4.23 | Phoenix Financial Serv | Last 4 digits of account r | number | 0291 | \$ | 33.00 |
| | Priority Creditor's Name 8902 Otis Ave Ste 103a Indianapolis, IN 46216 | When was the debt incur | red? | Opened 10/01/14 | | |
| | Number Street City State Zlp Code | As of the date you file, th | ne claim i | s: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | |
| | ■ Debtor 1 only | Ü | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Debtor 1 and Debtor 2 only | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY u | nsecured | I claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Yes | Other. Specify | Collect | tion Attorney Emp Of Cook Cour | nty | |
| 4.24 | Radiology Imaging Consultants | Last 4 digits of account r | number | СООВ | \$ | 290.00 |

Priority Creditor's Name

Entered 03/02/16 14:36:39 Case 16-07283 Doc 1 Filed 03/02/16 Desc Main Document Page 28 of 55 Debtor 1 Pamela A Stewart Case number (if know) 75 Remittance Dr. When was the debt incurred? 2014 Dept. #1324 Chicago, IL 60675-1324 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes collection Other. Specify 4.25 Raymond P. Garza, Attorney At 2,500.00 5445 Law Last 4 digits of account number \$ Priority Creditor's Name 7220 W. 194th St. When was the debt incurred? 2015 Suite #109 Tinley Park, IL 60487 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did

4.26 Td Bank Usa/targetcred Last 4 digits of account number Priority Creditor's Name

Po Box 673 When was the debt incurred? Active 5/26/14

When was the debt incurred?

Other. Specify

not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

collection

As of the date you file, the claim is: Check all that apply

■ No
□ Yes

728.00

Number Street City State Zlp Code

| Debtor 1 P | Case : | 16-07283 Stewart | Doc 1 | Filed 03/02/16 Document | Page 29 | of 5 | 7/02/16 14:36:39 55 number (if know) | Desc Ma | in | | |
|--------------|--------------------------------|---------------------------------------|------------------|---|---|------------------------------------|--|----------------------------------|----------------|--|--|
| Who | o incurred th | ne debt? Check o | ne. | ☐ Contingent | _ | | | | | | |
| _ | Debtor 1 only Debtor 2 only | | | ☐ Unliquidated | | | | | | | |
| | | Debtor 2 only | an ath ar | ☐ Disputed Type of NONPRIORITY | unsecured cla | im: | | | | | |
| | Check if this | claim is for a | | ☐ Student loans | | | | | | | |
| deb Is th | | ject to offset? | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | | |
| | No | | | | □ Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| | Yes | | | Other. Specify | Credit Car | rd | | | | | |
| | r any debts | | o not fill out o | tyou listed in Parts 1 or 2, r submit this page. On which entry in P Line of (Check one): Last 4 digits of acco | art 1 or Par Pa Pa | t2 di e art 1: art 2: | - | nal creditor? ty Unsecured Cl | aims | | |
| Part 4: A | Add the Am | ounts for Each | Type of Uns | secured Claim | | | | | | | |
| Total the a | | ertain types of u | | ms. This information is fo | r statistical rep | orting | | 2. §159. Add the amo | ounts for each | | |
| otal claims | 6a. | Domestic suppo | ort obligations | : | | 6a. | Total claim | 0.00 | | | |
| from Part 1 | 6b. | Taxes and certa | in other debts | you owe the government | t | 6b. | \$ | 0.00 | | | |
| | 6c. | | - | njury while you were into | | 6c. | \$ | 0.00 | | | |
| | 6d. | 6d. Other. Add all other priority uns | | ecured claims. Write that ar | mount here. | 6d. | \$ | 0.00 | | | |
| | 6e. | Total. Add lines | 6a through 6d. | | | 6e. | \$ | 0.00 | | | |
| otal claims | 6f. | Student loans | | | | 6f. | Total Claim | 0.00 | | | |
| from Part 2 | 6g. | | | eparation agreement or di | vorce that | 6g. | \$ | 0.00 | | | |
| | 6h. | you did not repo Debts to pensio | | ciaims aring plans, and other sim | ilar debts | 6h. | \$ \$ | 0.00 | | | |

Other. Add all other nonpriority unsecured claims. Write that amount

Total. Add lines 6f through 6i.

28,249.85

28,249.85

6j.

| | | DUCUITE | III FAUE SU ULSS | |
|---|-------------------------|-------------------|------------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Pamela A Stewar | t | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | _ 0, , , , , , |
| (if known) | | | | ☐ Check if this is ar amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | rerson of | Name, Number | whom you have the , Street, City, State and ZIF | e contract or lease Code | State what the contract or lease is for |
|----|-----------|--------------|--|-----------------------------|---|
| 1 | | · | • | | |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | <u> </u> |
| | ramboi | Ciroot | | | |
| | City | | State | ZIP Code | |
| 2 | | | | | |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | |
| | | | | | |
| | City | | State | ZIP Code | |
| .3 | | | | | |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | |
| | | | | | |
| | City | | State | ZIP Code | |
| .4 | | | | | <u></u> |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | |
| | | | | | |
| _ | City | | State | ZIP Code | |
| .5 | | | | | |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | |
| | | | | | |
| | City | | State | ZIP Code | |

| | | Docume | nt Page 31 of | <u>f 55 </u> | |
|-----------------------|--|--------------------------------|---------------------------|---|-------|
| Fill in this in | nformation to identify your ca | ase: | | | |
| Debtor 1 | Pamela A Stewart | | | | |
| DODIO! ! | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing | g) First Name | Middle Name | Last Name | | |
| United State | s Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case numbe | er er | | | | |
| (if known) | | | | ☐ Check if this is an | |
| | | | | amended filing | |
| Schedu Codebtors a | gether, both are equally respo | also liable for any debte | rrect information. If mor | complete and accurate as possible. If two married per space is needed, copy the Additional Page, fill it o | eople |
| | the entries in the boxes on t r (if known). Answer every qu | | onal Page to this page. | On the top of any Additional Pages, write your name | e and |
| ,400 11411150 | . (| | | | |
| 1. Do yo | ou have any codebtors? (If yo | ou are filing a joint case, do | not list either spouse as | a codebtor. | |
| ■ No | | | | | |
| ☐ Yes | | | | | |
| | | | | | |
| | n the last 8 years, have you l ia, Idaho, Louisiana, Nevada, Ne | | | ? (Community property states and territories include Ariz /isconsin.) | ona, |
| ■ No. G | Go to line 3. | | | | |
| | Did your spouse, former spouse | e, or legal equivalent live w | ith you at the time? | | |
| | | , , , | • | | |
| line 2 a | gain as a codebtor only if tha Schedule E/F (Official Form 1 | t person is a guarantor | or cosigner. Make sure | your spouse is filing with you. List the person show you have listed the creditor on Schedule D (Official e Schedule D, Schedule E/F, or Schedule G to fill out | Form |
| | olumn 1: Your codebtor ame, Number, Street, City, State and ZIF | ² Code | | Column 2: The creditor to whom you owe the de Check all schedules that apply: | bt |
| 3.1 | | | | ☐ Schedule D, line | |
| | ame | | | Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| | Otract | | | | |
| | umber Street ity | State | ZIP Code | | |
| | , | | | | |
| | | | | Пол. и в п | |
| 3.2 | ame | | | Schedule D, line | |
| IN. | a | | | ☐ Schedule E/F, line | |
| | | | | | |
| N | umber Street | | | _ | |

State

City

ZIP Code

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| E:11 | to the terror and the second terror and terr | | | | | i | | | |
|--------------------|--|---|---|--------------------------------|----------------|--------------------------------------|---------------------|--------------------------------------|--------------|
| | in this information to identify your casotor 1 Pamela A Ste | | | | | | | | |
| _ | otor 2 | | | | _ | | | | |
| Uni | ted States Bankruptcy Court for the: | NORTHERN DISTRIC | T OF ILLINOIS | | _ | | | | |
| | se number nown) | ☐ An amende☐ A suppleme | Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter 13 | | | | | | |
| \circ | fficial Form 106I | | | | | | | following date: - | |
| | chedule I: Your Inco | me | | | | MM / DD/ Y | YYY | | 12/15 |
| sup spo atta | as complete and accurate as possil plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O t 1: Describe Employment | re married and not filing spouse is not filing with | g jointly, and yo n you, do not in | our spouse is clude informa | livir atior | ng with you, include about your spou | de info se. If i | ormation about y more space is ne | our eded, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | or no | on-filing spouse | |
| | If you have more than one job, | Employment status | ■ Employed | ☐ Emple | ☐ Employed | | | | |
| | attach a separate page with information about additional employers. | Employment status | ☐ Not employe | ☐ Not e | ☐ Not employed | | | | |
| | Include part-time, seasonal, or | Occupation easonal or | | Makeup Artist | | | | | |
| | self-employed work. | Employer's name | Christian Dic | or | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 19 E 57th St New York, NY 10022 | | | | | | |
| | | How long employed th | ere? <u>1.5</u> | Years | | | | | |
| Par | Give Details About Mont | hly Income | | | | | | | |
| | mate monthly income as of the dat ss you are separated. | e you file this form. If yo | ou have nothing to | o report for any | / line | e, write \$0 in the spa | ace. In | clude your non-fili | ng spouse |
| | u or your non-filing spouse have more ce, attach a separate sheet to this forn | | ine the information | on for all emplo | yers | for that person on | the line | es below. If you ne | eed more |
| | | | | | | For Debtor 1 | | r Debtor 2 or n-filing spouse | |
| 2. | List monthly gross wages, salary deductions). If not paid monthly, ca | | | 2. | \$ | 1,516.67 | \$_ | N/A | - |
| 3. | Estimate and list monthly overting | ne pay. | | 3. | +\$ | 0.00 | +\$ | N/A | - |
| 4. | Calculate gross Income. Add line | 2 + line 3. | | 4. | \$ | 1,516.67 | \$ | N/A | |

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| Debto | or 1 | Pamela A | A Stewart | _ | Cas | se number (if known) | | | |
|-------|--------------------|--|---|----------|------|----------------------|------|--------------------------------|--------|
| | | | | | F | or Debtor 1 | | ebtor 2 or iling spouse | |
| | Cop | y line 4 her | re | 4. | \$ | 1,516.67 | \$ | N/A | |
| 5. | List | t all payroll | deductions: | | | | | | |
| | 5a. | Tax, Med | licare, and Social Security deductions | 5a. | \$ | 216.67 | \$ | N/A | |
| | 5b. | Mandato | ry contributions for retirement plans | 5b. | \$ | 0.00 | \$ | N/A | |
| | 5c. | Voluntar | y contributions for retirement plans | 5c. | \$ | 0.00 | \$ | N/A | |
| | 5d. | Required | I repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | N/A | |
| | 5e. | Insuranc | e | 5e. | \$ | 0.00 | \$ | N/A | |
| | 5f. | | c support obligations | 5f. | \$ | 0.00 | \$ | N/A | |
| | 5g. | Union du | | 5g. | \$ | 0.00 | \$ | N/A | |
| | 5h. | Other de | ductions. Specify: | 5h.+ | - \$ | 0.00 | + \$ | N/A | |
| 6. | Add | the payrol | I deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 216.67 | \$ | N/A | |
| 7. | Cal | culate total | monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 1,300.00 | \$ | N/A | |
| 8. | List 8a. | Net incomprofession Attach a streceipts, of | come regularly received: me from rental property and from operating a business, on, or farm statement for each property and business showing gross ordinary and necessary business expenses, and the total set income. | 8a. | \$ | 0.00 | \$ | NI/A | |
| | 8b. | - | and dividends | 8b. | \$ | 0.00 | \$ | N/A N/A | |
| | 8c. | Family so regularly Include al | upport payments that you, a non-filing spouse, or a dependent | | \$ | 0.00 | \$ | N/A | |
| | 8d. | | yment compensation | 8d. | \$ | 0.00 | \$ | N/A | |
| | 8e. | Social Se | ecurity | 8e. | \$ | 0.00 | \$ | N/A | |
| | 8f. | Include ca that you re | vernment assistance that you regularly receive ash assistance and the value (if known) of any non-cash assistance eceive, such as food stamps (benefits under the Supplemental Assistance Program) or housing subsidies. Assistance from State for Special needs child | 8f. | \$ | 1,034.00 | \$ | N/A | |
| | 8g. | Pension | or retirement income | 8g. | \$ | 0.00 | \$ | N/A | |
| | 8h. | Other mo | onthly income. Specify: | 8h.+ | - \$ | 0.00 | + \$ | N/A | |
| 9. | Add | d all other in | ncome. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$_ | 1,034.00 | \$ | N/A | |
| 10. | | | thly income. Add line 7 + line 9. in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | | 2,334.00 + \$_ | | N/A = \$2, | 334.00 |
| 11. | Incl othe Do | ude contribu er friends or i | regular contributions to the expenses that you list in Schedule tions from an unmarried partner, members of your household, your crelatives. In amounts already included in lines 2-10 or amounts that are not as | lepender | | · | | e <i>J.</i> 11. + \$ | 0.00 |
| | | | nt in the last column of line 10 to the amount in line 11. The res nt on the Summary of Schedules and Statistical Summary of Certain | | | | | | 334.00 |
| 13. | Do : | you expect No. | an increase or decrease within the year after you file this form | 1? | | | | Combined monthly in | |
| | $\overline{}$ | Yes. Ext | plain: | | | | | | |

Official Form 106I Schedule I: Your Income page 2

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| Fill | in this informat | ion to identify you | ır case: | | | | | | |
|------------|-----------------------------|---|--------------------------|---|---|-----------------------------|---|--|--|
| Deb | otor 1 | Pamela A Ste | ewart | | Check if this is: An amended filing | | | | |
| | otor 2 | | | | | | A supplement show | ving postpetition chapter 13 | |
| (Spo | ouse, if filing) | | | | | | expenses as of the | following date: | |
| Unit | ted States Bankr | uptcy Court for the: | NORTH | IERN DISTRICT OF ILLIN | OIS | | MM / DD / YYYY | | |
| 1 | e number nown) | | | | | | | | |
| O | fficial Fo | rm 106J | | | | | | | |
| S | chedule | J: Your I | Expen | ses | | | | 12/1 | |
| Be info | as complete a | ind accurate as | possible. eded, attac | If two married people are | | | | supplying correct ur name and case numbe | |
| Par | | ibe Your House | hold | | | | | | |
| 1. | Is this a join | | | | | | | | |
| | ■ No. Go to | line 2. s Debtor 2 live in | n a senara | te household? | | | | | |
| | □ 100. D00. | | a copara | | | | | | |
| | ☐ Ye | es. Debtor 2 mus | t file Officia | al Form 106J-2, Expenses | for Separate Househ | old of Debto | or 2. | | |
| 2. | Do you have | e dependents? | □ No | | | | | | |
| | Do not list De Debtor 2. | ebtor 1 and | ■ Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? | |
| | Do not state t | the | | | _ | | | □ No | |
| | dependents r | names. | | | Son | | 13 | ■ Yes □ No | |
| | | | | | | | | ☐ Yes | |
| | | | | | | | _ | □ No | |
| | | | | | | | | ☐ Yes | |
| | | | | | | | | □ No □ Yes | |
| 3. | | enses include | | No | | | | | |
| | | people other the your depender | | Yes | | | | | |
| Par | t 2: Estim | ate Your Ongoir | na Monthi | v Fynenses | | | | | |
| Est exp | imate your ex | penses as of yo | ur bankru | ptcy filing date unless your is filed. If this is a suppl | ou are using this fo emental <i>Schedule</i> . | rm as a sup J, check the | pplement in a Chap box at the top of t | ter 13 case to report he form and fill in the | |
| Inc | lude expenses | s paid for with n | on-cash o | overnment assistance if | vou know the | | | | |
| val | • | sistance and ha | - | d it on Schedule I: Your | • | | Your exp | enses | |
| (0 | | , | | | | | | | |
| 4. | | r home ownersh d any rent for the | | ses for your residence. In lot. | clude first mortgage | 4. | \$ | 0.00 | |
| | If not includ | ed in line 4: | | | | | | | |
| | 4a. Real e | state taxes | | | | 4a. | \$ | 0.00 | |
| | | rty, homeowner's, | | | | 4b. | | 0.00 | |
| | | maintenance, rep owner's association | | | | 4c. 4d. | : | 50.00 0.00 | |
| 5. | | | | ur residence, such as hor | ne equity loans | 5. | · | 0.00 | |

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| Debtor 1 | Pamela A | A Stewart | Case nur | mber (if known) | |
|---------------------|-----------------------------------|--|------------------------|---------------------|--------------------------|
| | | | | _ | |
| . Uti 6a. | lities: Electricity | heat, natural gas | 62 | . \$ | 250.00 |
| 6b. | • | ver, garbage collection | | . \$ | 50.00 |
| 6c. | • | , cell phone, Internet, satellite, and cable services | | . \$. \$ | |
| 6d. | • | | 6d | · · · | 150.00 |
| | | | 0d | · - | 0.00 |
| | | ekeeping supplies | | , | 350.00 |
| | | hildren's education costs | 8 | | 0.00 |
| | | y, and dry cleaning | 9 | · | 100.00 |
| | | roducts and services | 10 | · · | 50.00 |
| | | ntal expenses | 11 | . \$ | 250.00 |
| | | Include gas, maintenance, bus or train fare. | 12 | . \$ | 395.00 |
| | not include ca | | | · | |
| | | clubs, recreation, newspapers, magazines, and books | 13 | · | 75.00 |
| | | ibutions and religious donations | 14 | . \$ | 0.00 |
| | surance. | surrange deducted from your pay or included in lines 4 or 20 | | | |
| | not include ins a. Life insura | surance deducted from your pay or included in lines 4 or 20. | 150 | . \$ | 0.00 |
| | o. Health insu | | 15a | · <u> </u> | |
| | c. Vehicle ins | | 15c | * | 0.00 |
| | | | | · <u> </u> | 90.00 |
| | d. Other insu | | 15d | . э | 0.00 |
| | | clude taxes deducted from your pay or included in lines 4 or | 20. 16 | i. \$ | 0.00 |
| | ecify: | ase payments: | | . φ | 0.00 |
| | | nts for Vehicle 1 | 17a | \$ | 0.00 |
| | | ents for Vehicle 2 | 17a | · | 0.00 |
| | | | 176 17c | * | |
| | c. Other Spe | - | | · · | 0.00 |
| | d. Other. Spe | · | 17d | . э | 0.00 |
| | | of alimony, maintenance, and support that you did not our pay on line 5, Schedule I, Your Income (Official Fo | | . \$ | 0.00 |
| | | you make to support others who do not live with you. | iiii 100i). | \$ | 0.00 |
| | ecify: | you make to support outlots time do not live than your | 19 | · | 0.00 |
| | | erty expenses not included in lines 4 or 5 of this form o | | | |
| | | on other property | | . \$ | 0.00 |
| | o. Real estate | | 20b | · - | 0.00 |
| 200 | | omeowner's, or renter's insurance | | . \$ | 0.00 |
| | | ce, repair, and upkeep expenses | 20d | · | 0.00 |
| | | er's association or condominium dues | 20e | · <u> </u> | 0.00 |
| | | _ | | . μ . +\$ | |
| i. Oli | her: Specify: | Assessments | | . τψ | 435.00 |
| 2. Ca | lculate your r | nonthly expenses | | | |
| 228 | a. Add lines 4 t | hrough 21. | | \$ | 2,245.00 |
| 22b | o. Copy line 22 | (monthly expenses for Debtor 2), if any, from Official Form | 106J-2 | \$ | |
| 220 | c. Add line 22a | and 22b. The result is your monthly expenses. | | \$ | 2,245.00 |
| | | | | · — | |
| | | nonthly net income. | | | |
| | | 2 (your combined monthly income) from Schedule I. | 23a | | 2,334.00 |
| 23b | o. Copy your | monthly expenses from line 22c above. | 23b | \$ | 2,245.00 |
| | | | | | |
| 230 | | our monthly expenses from your monthly income. | 00- | • | 89.00 |
| | The result | is your monthly net income. | 23c | \$ | 09.00 |
| n4 D- | | m in an an alangan in years are a suitable to the con- | on often værtile 41-1- | form 2 | |
| | | In increase or decrease in your expenses within the year u expect to finish paying for your car loan within the year or do you | | | or decrease because of a |
| | | u expect to finish paying for your car loan within the year or do you terms of your mortgage? | oxpect your mortgage | payment to intredse | or decrease because of a |
| | No. | , | | | |
| | Yes. | Explain here: | | | |

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| Fill in this infor | mation to identify your | case: | | | |
|---------------------|--|---------------------------|-----------------------------|--------------------------------|----------------------------|
| Debtor 1 | Pamela A Stewart | <u> </u> | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | E: AN | ACT III AL | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | |
| | | | | | amended filing |
| | | | | | |
| Official For | m 106Dec | | | | |
| | | | Dali (ania Oal | lll | |
| Declarat | tion About a | an individual | Debtor's Sch | nedules | 12/15 |
| years, or both. 1 | y or property by fraud if 8 U.S.C. §§ 152, 1341, 1 n Below | | uptcy case can result in ti | ines up to \$250,000, or impr | isonment for up to 20 |
| Did you pa | y or agree to pay some | one who is NOT an attorn | ey to help you fill out ban | kruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. I | Name of person | | | ach Bankruptcy Petition Prepai | rer's Notice, Declaration, |
| | | | and S | Signature (Official Form 119). | |
| | alty of perjury, I declare te true and correct. | that I have read the summ | nary and schedules filed w | vith this declaration and | |
| X /s/ Par | nela A Stewart | | X | | |
| | a A Stewart re of Debtor 1 | | Signature of De | ebtor 2 | |
| Oigilatu | ic or Dobtor i | | | | |

Date

Date March 2, 2016

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| Fill | l in this inform | nation to identify your | case: | | | | | | |
|-------------------|----------------------|--|--|-------------|--|---|---|--|--|
| De | btor 1 | Pamela A Stewa | | | Last Name | | | | |
| De | btor 2 | FIRST Name | Middle Name | | Last Name | | | | |
| | ouse if, filing) | First Name | Middle Name | | Last Name | | | | |
| Un | ited States Ban | kruptcy Court for the: | NORTHERN DISTRICT | OF ILLIN | NOIS | | | | |
| | se number | | | | | | Check if this is an amended filing | | |
| St Be a | as complete a | of Financial | | re filing | together, both are ed | ankruptcy qually responsible for supp additional pages, write you | | | |
| ` | | , , | rital Status and Where You | ı Lived E | Before | | | | |
| 1. | What is your | current marital statu | s? | | | | | | |
| | ☐ Married ■ Not marr | ried | | | | | | | |
| 2. | During the la | st 3 years, have you | lived anywhere other than | where y | ou live now? | | | | |
| | ■ No. | | | | | | | | |
| | _ | ■ NoYes. List all of the places you lived in the last 3 years. Do not include where you live now. | | | | | | | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 there | lived | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | | |
| 3. stat | | | | | | y property state or territory Texas, Washington and Wisc | | | |
| Pa | | ke sure you fill out <i>Sch</i> en | edule H: Your Codebtors (Off | ficial Forr | m 106H). | | | | |
| ⊩զ 4. | Did you have | e any income from em | | ıg a busi | iness during this yea | er or the two previous calen | dar years? | | |
| | | | have income that you receive t | | | | | | |
| | □ No ■ Yes. Fill | in the details. | | | | | | | |
| | | | Debtor 1 | | | Debtor 2 | | | |
| | | | Sources of income Check all that apply. | (befo | ss income ore deductions and usions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | | \$4,354.00 | ☐ Wages, commissions, bonuses, tips | | | |
| | | | ☐ Operating a business | | | ☐ Operating a business | | | |

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Debtor 1 Pamela A Stewart Page 38 of 55

Case number (if known)

| | Debtor 1 | | Debtor 2 | |
|--|---|---|--|---|
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| For last calendar year: (January 1 to December 31, 2015) | ■ Wages, commissions, bonuses, tips | \$17,298.00 | ☐ Wages, commissions, bonuses, tips | |
| | ☐ Operating a business | | ☐ Operating a business | |
| For the calendar year before that: (January 1 to December 31, 2014) | ■ Wages, commissions, bonuses, tips | \$11,780.00 | ☐ Wages, commissions, bonuses, tips | |
| | ☐ Operating a business | | ☐ Operating a business | |
| List each source and the gross inco No Yes. Fill in the details. | me from each source separatel | y. Do not include income that y | you listed in line 4. | |
| Tes. Fill III the details. | | | | |
| | | | | |
| | Debtor 1 | | Debtor 2 | |
| | Debtor 1 Sources of income Describe below | Gross income (before deductions and exclusions) | Debtor 2 Sources of income Describe below. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | Sources of income | (before deductions and | Sources of income | (before deductions |

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

SSI Benefits

SSI Benefits

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

□ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more?

□ No. Go to line 7.

For the calendar year before that:

(January 1 to December 31, 2014)

Use List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\$12,408.00

\$12,408.00

* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

■ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

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Document Page 39 of 55 ase number (if known) Debtor 1 Pamela A Stewart **Creditor's Name and Address** Dates of payment Total amount Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment still owe paid 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. ☐ Yes. List all payments to an insider Insider's Name and Address Reason for this payment Dates of payment **Total amount** Amount you still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. П Nature of the case Case title Status of the case Court or agency Case number Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No Yes. Fill in the information below. **Creditor Name and Address** Value of the Describe the Property Date property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was **Amount** taken

Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

Yes Case 16-07283 Doc 1 Filed 03/02/16 Entered 03/02/16 14:36:39 Desc Main

Document Page 40 of 55 Case number (if known) Debtor 1 Pamela A Stewart Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per Describe the gifts Dates you gave Value the gifts person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No П Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment or Amount of Address transferred transfer was payment made **Email or website address** Person Who Made the Payment, if Not You Chang & Carlin, LLP 2015 \$871.00 1305 Remington Road \$871 for attorney fees. Suite C Schaumburg, IL 60173 Credit Info Net 2015 \$179.00 Dayton, OH \$179 2 years tax transcripts, credit reports, credit counseling and debtor education 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details.

Person Who Was Paid Description and value of any property Address transferred

Date payment or transfer was made

Amount of payment Case 16-07283 Doc 1 Filed 03/02/16 Entered 03/02/16 14:36:39 Desc Main Document Page 41 of 55

Case number (if known) Debtor 1 Pamela A Stewart 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Date transfer was Describe any property or Address property transferred payments received or debts made paid in exchange Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Last balance before Type of account or Date account was account number instrument closing or transfer Address (Number, Street, City, State and ZIP closed, sold, moved, or transferred Wells Fargo **XXXX-420** □ Checking \$420 \$420.00 P.O. Box 30086 09/2013 ■ Savings Los Angeles, CA 90030-0086 ■ Money Market □ Brokerage Other IRA \$420 Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Nο Yes. Fill in the details. Do you still Name of Financial Institution Who else had access to it? Describe the contents Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State have it? and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy Nο Yes. Fill in the details.

Who else has or had access

Address (Number, Street, City, State

to it?

and ZIP Code)

Describe the contents

Address (Number, Street, City, State and ZIP Code)

Name of Storage Facility

Do you still

have it?

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Debtor 1 Pamela A Stewart

| Par | t 9: Identify Property You Hold or Control for S | Someone Else | | | | | |
|-----|--|--|---|-----------------------|--|--|--|
| 23. | Do you hold or control any property that someon someone. | ne else owns? Include any property | y you borrowed from, are storing for, o | or hold in trust for | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value | | | |
| Par | t 10: Give Details About Environmental Informa | tion | | | | | |
| For | the purpose of Part 10, the following definitions a | pply: | | | | | |
| | Environmental law means any federal, state, or letoxic substances, wastes, or material into the air controlling the cleanup of these substances, was | , land, soil, surface water, groundw | - · | | | | |
| | Site means any location, facility, or property as own, operate, or utilize it, including disposal site | - | aw, whether you now own, operate, or | utilize it or used to | | | |
| | Hazardous material means anything an environmenterial, pollutant, contaminant, or similar term. | | waste, hazardous substance, toxic sub | ostance, hazardou | | | |
| Rep | ort all notices, releases, and proceedings that yo | u know about, regardless of when t | hey occurred. | | | | |
| 24. | Has any governmental unit notified you that you | may be liable or potentially liable | under or in violation of an environmer | ital law? | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | |
| 25. | Have you notified any governmental unit of any | release of hazardous material? | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | |
| 26. | Have you been a party in any judicial or adminis | trative proceeding under any envir | onmental law? Include settlements an | d orders. | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | |
| Par | t 11: Give Details About Your Business or Conr | nections to Any Business | | | | | |
| 27. | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? | | | | | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | |
| | ☐ A partner in a partnership | | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | |

Entered 03/02/16 14:36:39 Case 16-07283 Doc 1 Filed 03/02/16 Page 43 of 55 Document Case number (if known) Debtor 1 Pamela A Stewart No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2

/s/ Pamela A Stewart Pamela A Stewart Signature of Debtor 1 Date Date March 2, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this infor | rmation to identify your | case: | | |
|--|---|------------------------|---|--------------------------------------|
| Debtor 1 | Pamela A Stewart | | | |
| Debtor 2 | First Name | Middle Name | Last Name | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DIST | RICT OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| 000 : 15 | 400 | | | |
| Official Fo | | | | _ |
| <u>Stateme</u> | ent of Intention | on for Indiv | <u>riduals Filing Under Chapte</u> | er 7 12/15 |
| If you are an inc | dividual filing under cha | pter 7, you must fill | out this form if: | |
| creditors have | ve claims secured by yo | ur property, or | | |
| You must file th | ever is earlier, unless th | rithin 30 days after y | t expired. ou file your bankruptcy petition or by the date set fo time for cause. You must also send copies to the cr | |
| | eople are filing together ate the form. | in a joint case, both | are equally responsible for supplying correct infor | mation. Both debtors must sign |
| Do on complete | and accurate as passible | la lé mara angga ia . | anded ettech a concrete sheet to this form. On the | ton of any additional name |
| | your name and case num | | needed, attach a separate sheet to this form. On the | top of any additional pages, |
| Part 1: List Y | Your Creditors Who Have | a Sacurad Claims | | |
| | | | | |
| For any credi- information b | | art 1 of Schedule D: | Creditors Who Have Claims Secured by Property (O | fficial Form 106D), fill in the |
| | reditor and the property the | hat is collateral | What do you intend to do with the property that | Did you claim the property |
| | | | secures a debt? | as exempt on Schedule C? |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | ☐ Yes |
| Description of | f | | ☐ Retain the property and enter into a <i>Reaffirmation</i> Agreement. | ☐ Yes |
| property | | | Retain the property and [explain]: | |
| securing debt | t: | | | = |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | _ |
| Description of | f | | ☐ Retain the property and enter into a <i>Reaffirmation</i> | ☐ Yes |
| Description of property | ı | | Agreement. | |
| securing debt | t: | | ☐ Retain the property and [explain]: | |
| 3 | | | | - |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | □Yes |
| Description of | f | | ☐ Retain the property and enter into a <i>Reaffirmation Agreement</i> . | ⊔ Yes |
| property | • | | Agreement. Retain the property and [explain]: | |
| securing debt | t: | | are property and [overally. | |

Official Form 108

Creditor's

☐ Surrender the property.

☐ No

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| B8 (Form 8) (| 12/08) | | Page 2 |
|---------------|--|---|---------------------------------|
| name: | | ☐ Retain the property and redeem it. | ☐ Yes |
| | | ☐ Retain the property and enter into a <i>Reaffirmation</i> | |
| Descripti | | Agreement. | |
| property | | ☐ Retain the property and [explain]: | |
| securing | debt: | | _ |
| | | | |
| | List Your Unexpired Personal Property Lease | | |
| | | ted in Schedule G: Executory Contracts and Unexpired | |
| | | nexpired leases are leases that are still in effect; the leas the trustee does not assume it. 11 U.S.C. § 365(p)(2). | e period has not yet ended. You |
| Describe v | our unexpired personal property leases | | Will the lease be assumed? |
| Describe y | our unexpired personal property leases | | Will tile lease be assumed: |
| Lessor's na | | | □ No |
| Description | of leased | | _ |
| Property: | | | ☐ Yes |
| Lessor's na | ame: | | □ No |
| Description | of leased | | |
| Property: | | | ☐ Yes |
| Lessor's na | ame: | | □ No |
| Description | of leased | | |
| Property: | | | ☐ Yes |
| Lessor's na | ame: | | □ No |
| Description | of leased | | |
| Property: | | | ☐ Yes |
| Lessor's na | ame: | | □ No |
| Description | of leased | | |
| Property: | | | ☐ Yes |
| Lessor's na | ame: | | □ No |
| Description | of leased | | _ |
| Property: | | | ☐ Yes |
| Lessor's na | ame: | | □ No |
| Description | of leased | | _ |
| Property: | | | ☐ Yes |
| Part 3: | Sign Below | | |
| | | | |
| | alty of perjury, I declare that I have indicated at is subject to an unexpired lease. | my intention about any property of my estate that secu | res a debt and any personal |
| | amela A Stewart | X | |
| | ela A Stewart | Signature of Debtor 2 | |
| | ture of Debtor 1 | • | |
| D-11 | M. J. 0. 0040 | Dete | |
| Date | March 2, 2016 | Date | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee + \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee+ \$75 administrative fee\$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-07283 Doc 1 Filed 03/02/16 Entered 03/02/16 14:36:39 Desc Main Document Page 50 of 55

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In re | Pamela A Stewart | | Case N | | |
|----------|---|--|---|--|------------|
| | | Debtor(s) | Chapte | r <u>7</u> | |
| | DISCLOSURE OF COMP | ENSATION OF ATTO | RNEY FOR | DEBTOR(S) | |
| cc | ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 compensation paid to me within one year before the e rendered on behalf of the debtor(s) in contemplation | filing of the petition in bankruptcy | y, or agreed to be | paid to me, for services re | |
| | For legal services, I have agreed to accept | | \$ | 871.00 | |
| | Prior to the filing of this statement I have receive | | | 871.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. \$_ | 335.00 of the filing fee has been paid. | | | | |
| 3. T | he source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. T | he source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 5. | I have not agreed to share the above-disclosed co- firm. | ompensation with any other persor | n unless they are r | nembers and associates of | my law |
| | I have agreed to share the above-disclosed compopy of the agreement, together with a list of the | | | | w firm. A |
| 5. Ir | n return for the above-disclosed fee, I have agreed t | o render legal service for all aspec | cts of the bankrup | tcy case, including: | |
| b. c. | Analysis of the debtor's financial situation, and repreparation and filing of any petition, schedules, Representation of the debtor at the meeting of creation [Other provisions as needed] Negotiations with secured creditors to represent the reaffirmation agreements and application for avoidance of liens on household good | statement of affairs and plan whice ditors and confirmation hearing, a educe to market value; exempt ons as needed; preparation and | ch may be require and any adjourned ion planning; pro | d; I hearings thereof; eparation and filing of | |
| 7. B | y agreement with the debtor(s), the above-disclosed Representation of the debtors in any dis other adversary proceeding. | | | relief from stay actions | or any |
| | | CERTIFICATION | | | |
| | certify that the foregoing is a complete statement of inkruptcy proceeding. | f any agreement or arrangement for | or payment to me | For representation of the de | btor(s) in |
| Ma | arch 2, 2016 | /s/ John P. Carlin | | | |
| Da | • | John P. Carlin 627 Signature of Attorna John Carlin 1305 Remington F Suite C | <i>ey</i> Road | | _ |
| | | Schaumburg, IL 6 847-843-8600 Fa | 0173 ax: 847-843-860 | 5 | |
| | | jcarlin@changand | | | _ |
| | | Name of law firm | | | |

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> CHANG & CARLIN ATTORNEYS AT LAW

| RE 2: Car 1: Car 2: Other: | Unsecured Debts | Non-Dischargeable Taxes: Student loans: Gov't fines: Child support: NSF: Other: |
|---|--|--|
| ATTORNEYS FEES Attorney Fee Due Diligence Fee Court Filing Fee | CHAPTER 7 \$ 900 \$ 100 \$ 306 | CHAPTER 13 S S S |
| Total Fee Today you paid us \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | as your retainer fee. You | agree to pay your balance of before |
| Estimated Chapter 13 payment S for mo | | the unsecured, non-priority creditors claims. |
| You are retaining Chang & Carlin, LLP (herei | g referred to as I aw Office) to propers and file. | position for horizontal |
| Code; preparation and filing of the petition, repres services not specifically stated. Additional fees w (\$600); and motions to avoid lien (\$300). As case of your assets, debts, and all financial information discontinue our services at any time, you would be cancellation or discontinuation of services must be "Law Office" to obtain any and all documents that complete disclosure of information, and your revie checks. 7.) Client authorizes Chang & Carlin to fees with them on the basis of work. Client author causes of actions client may have. 8.) All fees are legal services, and no interest or other charges are | in this matter include, pre-filing advice, advice durentation at the meeting of creditors; submitting infail be charged for failure to appear at your creditors information is discovered and analyzed the fee and and understand that it is a federal crime to omit information is discovered and endityzed the fee and and understand that it is a federal crime to omit information is entitled to a refund of unearned fees. In that event expressed in writing. 4.) Client agrees that the signary and signature of your entire bankruptcy petition, the co-counsel or independent attorneys as needed, it is a co-counsel or independent attorneys within the firm of advance payment retainers" and are carned upon | a petition for bankruptcy on your behalf and to represent youring the case concerning the nature and effect of the Bankruptcy ormation pursuant to request from the trustee and other routine meeting (\$150); redemption motions pursuant to section 722 dadvice may change 2.) You agree that you will fully disclose a formation from your bankruptcy petition. 3.) If you decide to you will be billed at an hourly rate of \$250/hour and all mature on this contract also grants a limited power of attorney to nkruptcy will be filed without: full payment of fees and costs, 6.) Clients will be charged a non-refundable \$25 fee for returned at Chang & Carlin's expense to work on this matter and divide or outside counsel to review clients' file to explore other potential receipt. This is not an extension of credit, it is payment toward ies is contained in this instrument, except as otherwise indicated and and understand this Agreement. |
| Code; preparation and filing of the petition, repres services not specifically stated. Additional fees w (\$600); and motions to avoid lien (\$300). As case of your assets, debts, and all financial information discontinue our services at any time, you would be cancellation or discontinuation of services must be "Law Office" to obtain any and all documents that complete disclosure of information, and your revie checks. 7.) Client authorizes Chang & Carlin to It fees with them on the basis of work. Client author causes of actions client may have. 8.) All fees are legal services, and no interest or other charges are The parties agree to all of the terms and conditions You further state and agree as follows: I have been advised by my attorney. | in this matter include, pre-filing advice, advice durentation at the meeting of creditors; submitting infailibe charged for failure to appear at your creditors information is discovered and analyzed the fee and and understand that it is a federal crime to omit information is discovered and analyzed the fee and and understand that it is a federal crime to omit information is entitled to a refund of unearned fees. In that event is expressed in writing. 4.) Client agrees that the signary are necessary for the filing of this case. 5.) No Basew and signature of your entire bankruptcy petition, tire co-counsel or independent attorneys as needed, rizes Law Office to have attorneys within the firm of "advance payment retainers" and are earned upon involved. 9.) The entire contract between the part is set forth herein and acknowledge that they have refused to that I am required to complete a credition. | ring the case concerning the nature and effect of the Bankruptcy ormation pursuant to request from the trustee and other routine meeting (\$150); redemption motions pursuant to section 722 and to request from the trustee and other routine meeting (\$150); redemption motions pursuant to section 722 and to redempt and the section 722 and to redempt and the section 722 and to redempt and the section from your bankruptcy petition. 3.) If you decide to you will be billed at an hourly rate of \$250/hour and all mature on this contract also grants a limited power of attorney to nkruptcy will be filed without: full payment of fees and costs, 6.) Clients will be charged a non-refundable \$25 fee for returned at Chang & Carlin's expense to work on this matter and divide or outside counsel to review clients' file to explore other potential receipt. This is not an extension of credit, it is payment toward its is contained in this instance. |
| Code; preparation and filing of the petition, repres services not specifically stated. Additional fees w (\$600); and motions to avoid lien (\$300). As case of your assets, debts, and all financial information discontinue our services at any time, you would be cancellation or discontinuation of services must be "Law Office" to obtain any and all documents that complete disclosure of information, and your revie checks. 7.) Client authorizes Chang & Carlin to fees with them on the basis of work. Client authorities with them on the basis of work. Client authorities are legal services, and no interest or other charges are The parties agree to all of the terms and conditions. You further state and agree as follows: I have been advised by my attorney. I have been advised by my attorney. Trustee's office. I have been advised by my attorney recent year in which I was required to fil filed; a government issued photo ID; and I have been advised by my attorney. | in this matter include, pre-filing advice, advice due that in this matter include, pre-filing advice, advice due that in the meeting of creditors; submitting infaill be charged for failure to appear at your creditors information is discovered and analyzed the fee and and understand that it is a federal crime to omit in the entitled to a refund of unearned fees. In that event expressed in writing, 4.) Client agrees that the signare necessary for the filing of this case. 5.) No Baker and signature of your entire bankruptcy petition, the co-counsel or independent attorneys as needed, rizes Law Office to have attorneys within the firm of "advance payment retainers" and are earned upon involved. 9.) The entire contract between the part is set forth herein and acknowledge that they have refused to the provide copies of the interest of the proof of my social security number. | ring the case concerning the nature and effect of the Bankruptcy ormation pursuant to request from the trustee and other routine meeting (\$150); redemption motions pursuant to section 722 and to request from the trustee and other routine meeting (\$150); redemption motions pursuant to section 722 and to reduce may change 2.) You agree that you will fully disclose a formation from your bankruptcy petition. 3.) If you decide to you will be billed at an hourly rate of \$250/hour and all mature on this contract also grants a limited power of attorney to nkruptcy will be filed without: full payment of fees and costs, 6.) Clients will be charged a non-refundable \$25 fee for returne at Chang & Carlin's expense to work on this matter and divide or outside counsel to review clients' file to explore other potential receipt. This is not an extension of credit, it is payment toward less is contained in this instrument, except as otherwise indicated and understand this Agreement. |
| Code; preparation and filing of the petition, repres services not specifically stated. Additional fees w (\$600); and motions to avoid lien (\$300). As case of your assets, debts, and all financial information discontinue our services at any time, you would be cancellation or discontinuation of services must be "Law Office" to obtain any and all documents that complete disclosure of information, and your revie checks. 7.) Client authorizes Chang & Carlin to fees with them on the basis of work. Client authorizes of actions client may have. 8.) All fees are legal services, and no interest or other charges are The parties agree to all of the terms and conditions You further state and agree as follows I have been advised by my attorney. Trustee's office. I have been advised by my attorney recent year in which I was required to fil filed; a government issued photo ID; and I have been advised by my attorney voluntarily. I have been advised by my attorney file for relief under Chapter 13 bankrunter. | in referred to as Law Office) to prepare and file in this matter include, pre-filing advice, advice durentation at the meeting of creditors; submitting infaill be charged for failure to appear at your creditors information is discovered and analyzed the fee and and understand that it is a federal crime to omit information is discovered and analyzed the fee and and understand that it is a federal crime to omit information is discovered and analyzed the fee and and understand that it is a federal crime to omit information in the entitled to a refund of unearned fees. In that event is expressed in writing, 4.) Client agrees that the signare necessary for the filing of this case. 5.) No Ba wand signature of your entire bankruptcy petition, the co-counsel or independent attorneys as needed, rizes Law Office to have attorneys within the firm of "advance payment retainers" and are earned upon involved. 9.) The entire contract between the part is set forth herein and acknowledge that they have refused to the provide complete a credit (s) that I am required to complete a credit (s) that I am required to provide copies of the a return; proof of all my income for the proof of my social security number. (s) that I am not required to hire an attorn that if my gross income is greater than the proof of that if my gross income is greater than the proof of that if my gross income is greater than the proof of that if my gross income is greater than the proof of that if my gross income is greater than the proof of that if my gross income is greater than the proof of that if my gross income is greater than the proof of the proof of the greater than the proof of the greater tha | ring the case concerning the nature and effect of the Bankruptcy ormation pursuant to request from the trustee and other routine meeting (\$150); redemption motions pursuant to section 722 and advice may change 2.) You agree that you will fully disclose a formation from your bankruptcy petition. 3.) If you decide to you will be billed at an hourly rate of \$250/hour and all mature on this contract also grants a limited power of attorney to nkruptcy will be filed without: full payment of fees and costs, 6.) Clients will be charged a non-refundable \$25 fee for returned at Chang & Carlin's expense to work on this matter and divide or outside counsel to review clients' file to explore other potential receipt. This is not an extension of credit, it is payment toward ies is contained in this instrument, except as otherwise indicated and understand this Agreement. It counseling course prior to filing my case. It counseling course as required by the US of the documents: my filed tax return, for the most to the documents my filed tax return, for the most to the documents prior to the date my bankruptcy case is |

United States Bankruptcy Court Northern District of Illinois

| In re | Pamela A Stewart | | Case No. | |
|-------|---|---|------------------------------|---------------|
| | | Debtor(s) | Chapter 7 | |
| | VER | IFICATION OF CREDITOR M | IATRIX | |
| | | Number of | f Creditors: | 24 |
| | The above-named Debtor(s) he (our) knowledge. | ereby verifies that the list of credit | ors is true and correct to t | he best of my |
| Date: | March 2, 2016 | /s/ Pamela A Stewart Pamela A Stewart Signature of Debtor | | |

Advocate Medical Group 8550 W. Bryn Mawr Ave, 8th Floor Chicago, IL 60631

Atlantic Crd Po Box 13386 Roanoke, VA 24033

Bay Area Credit Service PO Box 467600 Atlanta, GA 31146

Capital 1 Bank Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Comenity Capital Bank/HSN Attn: Bankruptcy Po Box 183043 Columbus, OH 43218

Credit Control, LLC PO Box 5757 Phantom Dr. Suite 330 Hazelwood, MO 63042

Eastern Account System INC. Attn: Bankruptcy Dept. Po Box 837 Newtown, CT 06470

Glass Mountain Capital LLC 1930 Thoreau Dr. Ste. 100 Schaumburg, IL 60173

Great Expectations 1375 Woodfield Rd. Suite 100 Schaumburg, IL 60173

H & R Accounts Inc 7017 John Deere Pkwy Moline, IL 61265

ics p.o. box 1010 Tinley Park, IL 60477-9110

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Med Business Bureau Po Box 1219 Park Ridge, IL 60068

Midland Credit Management 2365 Northside Dr Suite #300 San Diego, CA 92108

Midland Funding 8875 Aero Dr Ste 200 San Diego, CA 92123

Midwest Orthopaedic Consultant 75 Remittance Dr. 6581 Chicago, IL 60675

Nothland Group Po Box 390846 Minneapolis, MN 55439

Onemain 6801 Colwell Blvd Irving, TX 75039

Onemain Fi 6801 Colwell Blvd Irving, TX 75039 Phoenix Financial Serv 8902 Otis Ave Ste 103a Indianapolis, IN 46216

Radiology Imaging Consultants 75 Remittance Dr. Dept. #1324 Chicago, IL 60675-1324

Raymond P. Garza, Attorney At Law 7220 W. 194th St. Suite #109
Tinley Park, IL 60487

Td Bank Usa/targetcred Po Box 673 Minneapolis, MN 55440